PTO/SB/08A
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Onder the Paperwork Reduction Act of 1993, no persons are i	required to respond to a collection of	information unless it contains a valid OMB control number.	
Substitute of form 1449/PTO	Complete if Known		
INFORMATION DISCLOSURE STATEMENT BY	Application Number	10/715,004	
SAPPLICANT	Filing Date	November 17, 2003	
FEB 2 4 2004 7	First Name Inventor	Rondall Stewart	
	Group Art Unit	Not Yet Known	
(use as many sheets as necessary)	Examiner Name	Not Yet Known	
CAS DADGRAND	Attamen Dealer Menter	010341 0017 00	

U.S. PATENT DOCUMENTS				
Examiner Initials	U.S. Patent Document Number	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document	
pur	5,388,282	Cherry	2/14/1995	
ust	6,158,060	Wheeler	12/12/2000	
•				

	FOREIGN PATENT DOCUMENTS							
Examiner Initials	Country Code	Foreign Patent Document Number	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document	Translation	English Abstract		
	ŀ							
	1.							

examiner \(\sigma \)	Date Considered	3/14/05
-----------------------	--------------------	---------

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer. Patent and Trademark Office, Washington, DC 0231.

DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box Alexandria, VA 22313-1450.

PTO/SB/08B

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB number.

Complete if Known **Application Number** 10/715,004 INFORMATION DISCLOSURE Filing Date November 17, 2003 First Named Inventor Rondall Stewart STATEMENT BY APPLICANT Group Art Unit Not Yet Known (use as many sheets as necessary) Examiner Name Not Yet Known Sheet Attorney Docket Number 010341-9017-00

OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS
Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, pages(s), volume-issue numbers(s), publisher, city and/or country where published.
ACORN ENGINEERING CO., Modulette fixed position toilet and a large stainless steel sink, $1 \rho_5$.
ACORN ENGINEERING CO., Swingette floor mounted toilet, 1 ps.
ACORN ENGINEERING COMPANY, Patient Healthcare Systems, multi-functional stations consisting of a concealed toilet, 4 pgs.
ACORN ENGINEERING CO., Versalette featuring a concealed fixed toilet, 1 ps.
WHITEHALL MANUFACTURING, ADA Versalette multi-functional care station consisting of a concealed toilet, 2 内もら
-

Examiner	,	1 4		Date		1 /	
Lamine	\sim 1	<i>d</i> 1	1 4	Date		11./	
Signatura	16/2	$y \sim 1$		Concidered	1 5/	1660	
Signature			/ · · · · · · · · · · · · · · · · · · ·	Considered	/		

EXAMINER: Initial if reference considered, whether of not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.